

# Education Record

1. From the desktop, there are two ways to access the Person Management page:
  - a. Select the Participant View checkbox on the cases tab and expand your case and select the participant to open the Person Management page:

The screenshot shows the eWISACWIS interface. At the top, there's a navigation bar with 'Actions', 'Financial', 'State', 'Security', 'Refresh', 'Search', and a user profile 'Caitlin M. Cake (Milwaukee County) | Log Out'. Below this is a 'Cases' tab with sub-tabs for 'Providers (193)', 'Workers (64)', 'Approvals (1107)', 'Access Reports (122)', 'JCPC Referrals (3)', 'Home Inquiries (32)', and 'Quick Links'. The 'Cases' section has a 'View by:' dropdown set to 'Participant' and a 'Filter by:' section with 'Date restricted' and 'Not approved/cancelled' checkboxes. A 'Cases: 426' count is shown. Below the filters, there's a 'Create case work' button and a search bar with 'american' entered. The main content area shows a list of participants under the heading 'American, Annie M. (9221587)'. The first participant, 'American, Annie M. 08/08/1970 Reference Person (None) - Active', is highlighted with a red box and a mouse cursor. Other participants include 'American, Jack 06/01/1973 Present Spouse (CPS) - Active', 'Andrews, Annie M. 10/09/2005 Biological Child, OHC (CPS) - Active', and 'Andrews, Fannie 01/01/2000 Biological Child, OHC (None) - Active'.

- b. The second is to click on the case name to open the Maintain Case page:

This screenshot shows the same eWISACWIS interface, but with the 'View by:' dropdown set to 'Case'. The 'Cases' section shows a list of cases. The first case, 'American, Annie M. (9221587)', is highlighted with a red box and a mouse cursor. Below the case name, there's a 'View case information' button. The case details for 'American, Annie M. (9221587)' are displayed, including 'Case details: CPS Family - Ongoing', 'Case address: 123 Main Abbotsford, WI 54405', 'Primary worker: Dan, Daisy (414) 789-7897', and 'Actions: Please select an action'.

Click on the name of the participant in the Active Participants group box to open the Person Management page.

Maintain Case - ID: 9221587 - Internet Explorer

**eWiSACWIS** Print Help

**Case: 9221587**

Name: **American, Annie M.** Case Type: **CPS Family - Ongoing**

County: **Barron** Site/Region: **Barron - Barron**

CARES Case #: County Case #:

☐ Restricted Designation: [Select Program](#) Status: Open 10/24/2005

**Participants** Address Collaterals Closing/Merge History

**Active Participants**

Name	Person Type	Rsp	Household	DOB	Gender	Relationship	Legal	Program	
<a href="#">America, James (9224493)</a>	None	<input checked="" type="checkbox"/>	N	01/18/1966		Grandparent	N/A	N	<a href="#">DeAct</a> <a href="#">Rem</a>
<a href="#">American, Annie M. (9223760)</a>	None	<input checked="" type="checkbox"/>	U	08/08/1970	F	Reference Person	N/A	N	<a href="#">DeAct</a> <a href="#">Rem</a>
<a href="#">American, Boy (9229114)</a>	CPS, ICPC	<input checked="" type="checkbox"/>	U	01/01/2004	M	Biological Child	N/A	N	<a href="#">DeAct</a> <a href="#">Rem</a>
<a href="#">American, Jack (9223669)</a>	CPS	<input checked="" type="checkbox"/>	U	06/01/1973	M	Present Spouse	N/A	N	<a href="#">DeAct</a> <a href="#">Rem</a>
<a href="#">Andrews, Annie M. (9222721)</a>	CPS	<input checked="" type="checkbox"/>	Y	10/09/2005	F	Biological Child	<a href="#">Guardianship to Agency</a>	N	<a href="#">DeAct</a> <a href="#">Rem</a>

2. On the Person Management page, click on the Education tab.

eWiSACWIS x Maintain Case - ID: 9223581 x

**Person Management - Aardvark, Amy B. (9226559)** TM Print Help

**Basic** Parent Info Additional Address **Education** Characteristics Medical/Mental Health Supplemental MMH

**Basic Education Information**

☐ Child is less than age five and does not attend early education or day care. ☐ Child is less than age five and attends child care that is not early education, pre-school or 4K.

☐ The child is in an early intervention program. ☐ School district has been notified of child's placement (if age two or older).

☐ Child is in day treatment. ☐ Child was attending school but is currently listed as missing from the out-of-home placement.

☐ Child is of school age but is not attending school. Provide explanation.

☐ Child is Currently Enrolled in School

**Highest Grade Level Completed:**

Describe current academic performance. Include grade level, special achievements and current educational difficulty(s). Include the date and source of your information.

Diploma/Certificate: Diploma/Certificate Date: 00/00/0000

Anticipated High School Graduation Date: 06/30/2025 Updated On: 00/00/0000 By:

**Individualized Education Plan (IEP)**

☐ **Child has an Individualized Education Plan** ☐ Copy of IEP in Record ☐ Extended School Year Last Updated By: Caitlin C. Cake

Date of Current IEP: 00/00/0000 Date Current IEP Expires: 00/00/0000 Date Last Updated: 01/18/2018

Options: Go

Save Close

3. In the Basic Education Information group box, check the checkboxes that apply to the child's current school situation. These will prefill to the child's Permanency Plan. If you select the checkbox "Child is of school age but is not attending school. Provide explanation," then the narrative below will become enabled and required. If the child is currently enrolled in school, check the associated checkbox (the narrative box will also become enabled and required). Select the child's Highest Grade Level Completed. If the child has received a diploma or certificate, select the appropriate diploma or certificate value from the dropdown and add the Diploma/Certificate Date. If the child is in high school, enter the Anticipated High School Graduation Date. When entered, this will update the 'Updated On' and 'By' fields.
4. If the child has an Individualized Education Plan (IEP), check the checkbox and enter the Date of Current IEP. If the box is checked, this will factor into determining the Eligibility for Extension of Out-of-Home Care on the Transition to Discharge tab on the Independent Living page. The 'Date Current IEP Expires' field will automatically prefill for one year in the future if a Date of Current IEP is entered. If there is a hard copy of the IEP in the file and/or the child is on an Extended School Year, check the appropriate boxes.

Individualized Education Plan (IEP)			
<input type="checkbox"/> Child has an Individualized Education Plan	<input type="checkbox"/> Copy of IEP in Record	<input type="checkbox"/> Extended School Year	Last Updated By: Caitlin C. Cake
Date of Current IEP: 00/00/0000	Date Current IEP Expires: 00/00/0000	Date Last Updated: 06/19/2018	

  

Birth to 3 - Individualized Family Service Plan (IFSP)		
<input type="checkbox"/> Child has an Individualized Family Service Plan	<input type="checkbox"/> Copy of IFSP in Record	Last Updated By:
Date of Current IFSP: 00/00/0000	<a href="#">Details</a>	Date Last Updated:

If the child is under the age of three and has a Birth to 3 – Individualized Family Service Plan (IFSP), check the checkbox and enter the date of the current IFSP. The details flare identifies what an IFSP is.

The Birth to 3 Program provides early intervention services to infants and toddlers throughout Wisconsin. This program is authorized under the federal Individuals with Disabilities Education Act (IDEA), Part C for Infants and Toddlers, and Chapter DHS 90 of the Wisconsin Administrative Code. The U.S. Department of Education, Office of Special Education Programs (OSEP), is the federal administering agency. Wisconsin's county Birth to 3 agencies operate the program at the local level, while the DHS Birth to 3 Program staff provide technical assistance and conduct county program oversight, monitoring, and enforcement activities. An eligible child has an Individualized Family Service Plan (IFSP) developed by the Birth to 3 Program team. The IFSP outlines specific developmental outcomes or goals for the child. Formal and informal supports and services to meet the outcomes are detailed on this plan. Formal services may include: special instruction; physical, occupational, or speech therapy; transportation; family education and counseling; assistive technology services and devices; audiology; health or medical services, in a limited manner.

[Details](#)

If the child is under the age of three the Birth to 3 – Individualized Family Service Plan (IFSP) group box will show an area to document birth to 3 referrals. If the child has a substantiated Assessment an automatic referral will show in this box. There is also an option here to send a manual referral. A worker can only send one referral per day. Referral files are sent nightly and the rows are updated to a sent status. The Create button is only enable when a referral can be sent.

Birth to 3 - Individualized Family Service Plan (IFSP)

☐ Child has an Individualized Family Service Plan
☐ Copy of IFSP in Record
Last Updated By:

Date of Current IFSP: 00/00/0000
[Details](#)
Date Last Updated:

After a referral is created the page will reflect the pending file submission.

Referral Type	Date Created	Referring Worker	County	Status	Date Sent
Manual Referral	10/25/2019	Caitlin C. Cake	Milwaukee	Pending	

If a manual and automatic referral are submitted the same day you would see both types of referrals listed.

Birth to 3 - Individualized Family Service Plan (IFSP)

☐ Child has an Individualized Family Service Plan
☐ Copy of IFSP in Record
Last Updated By:

Date of Current IFSP: 00/00/0000
[Details](#)
Date Last Updated:

Referral Type	Date Created	Referring Worker	County	Status	Date Sent
<a href="#">Substantiated Assessment - Automated Referral</a>	10/25/2019	Caitlin C. Cake	Milwaukee	Pending	
Manual Referral	10/25/2019	Caitlin C. Cake	Milwaukee	Pending	

Create

Automatic referrals are displayed here from an approved substantiated Assessment. The automatic referral will also show on the results tab of the substantiated Assessment.

eWiSACWIS Assessment

**eWiSACWIS** Resource TM Print Help

Assessment		Report	
Name: American, Annie M.	Assessment ID: 9222959	Status: Open	Date: 10/25/2019
Participants	Basic	Allegations	Results
<b>Assessment Results</b> Result: Substantiated		<b>Family RA Future A/N</b> Abuse Score: Neglect Score: Risk Level:	
<b>Disposition</b> Case Closed- Child Safe-Referral to other services		<b>Safety Assessment</b> Safety Decision: Safe	
<b>Initial Face-to-Face Contact Information</b> Initial Face-to-Face Must Occur By: 10/25/2019 11:59 PM Initial Face-to-Face Documented: 10/25/2019 08:00 AM		<b>Strengths and Needs</b> Needs Level:	
<b>Birth to Three Referral Information</b>			
Alleged Victim Boy American		DOB 01/01/2019	Referred Automated Referral Pending

Options:  Go Save Close

- Complete the School District Jurisdiction History group box. Select the appropriate values from the dropdowns for the School District of Jurisdiction and Reason for Change. The Start Date, Contact Person, and Phone Number are user-entered fields.

**School District Jurisdiction History**

School District of Jurisdiction	Start Date	Reason for Change	Contact Person	Phone Number	
Alma Center Sch Dist	10/17/2018	Child Adopted Child in DCF Facility Child in Other State Facility Child in Private Facility Child Placed in New School District Department of Education Determination <b>Educational Responsibility Out-of-State</b> Enrolled in Private School Enrolled in Public School No Transportation Parent/Guardian Address Change Parent/Guardian Deceased Parent/Guardian Whereabouts Unknown Parental Rights Terminated School Determination		(123)468-8889	Notify Delete Insert

- On the right side of the School District Jurisdiction History group box are Notify and Delete hyperlinks, as well as an Insert button. The Delete hyperlink will delete the corresponding row. The Insert button will add another row for the School District Jurisdiction History. By clicking on the Notify hyperlink, a new page is launched called the Notification page. Clicking on the Text hyperlink on that page will launch a letter for the case manager to print and send to all appropriate parties. Click on Save and then Close to return to the Education tab.

Notification
TM
Print
Help

Notification Information

Reason: Child Adopted
Text

Original Sent To: Alma Center Sch Dist
Recipient Type: Anticipated School Jurisdiction

CC Sent To:
Recipient Type:

CC Sent To:
Recipient Type:

CC Sent To:
Recipient Type:

CC Sent To:
Recipient Type:

CC Sent To:
Recipient Type:

Date Orig Sent: 00/00/0000

District Address: 124 S School St - Alma Center, WI 54611-1200

School Name:

School Address:

Options: Go
Insert

Save Close

- In the School History group box, the Insert button allows you to enter the child's school history. Once Insert is selected, this brings up the Maintain Education History page.

School History

School Name	School Type	Program Type	Program	Grade	Spec Ed	Start Date	Completion Status
New Testament Christian Academy	Charter School	Early Childhood - Special Education		Pre-school	<input checked="" type="checkbox"/>	04/15/2016	<a href="#">Delete</a> <a href="#">Edit</a> <a href="#">Copy</a>

Insert

- On the Maintain Education History page, the School Name is an AJAX-enabled field. Begin typing any part of the school name and eWiSACWIS will attempt to find a match. Selecting a school from the available choices will prefill the School Address, School District, School Type, Program Type, Contact Person, and Phone Number fields. If the school is designated as a Special Education school, the Special Education checkbox will also be automatically checked. With the exception of School Address, all prefilled values can be changed. If you type a School Name that is not found in the eWiSACWIS database, no other information will prefill.
  - Check the Primary check box if this school is the child's primary school. The Primary checkbox will be disabled if another school has already been indicated as the primary.
  - The 'Reason for changing to this school:' dropdown will only appear if a new primary school is entered for the child.

- Enter the Student ID, Program, Specialized Programs, and Current Grade Level.
- If the Special Education checkbox is selected, the corresponding dropdown field will become enabled and required.
- If you select “No” to the question, “Is this grade level where the child should be (do not include a child who voluntarily begins kindergarten at age 6)?” a new question appears with a required dropdown asking for the primary reason for the child not being on grade level. If you select “Other” from the dropdown, a narrative box displays to enter comments.
- Start Date and End Date are user-entered fields. If you enter an End Date, the Completion Status dropdown will be enabled for selection.
- Click Continue when finished.

**Maintain Education History** Print Help

**Information**

School Name:  ☐ Primary

School Address:

School District:

School Type:

Student ID:

Program Type:

Program:

Specialized Programs: ☐ 504 Plan ☐ English as a Second Language (ESL) ☐ Gifted ☐ Other

Current Grade Level:  ☐ Special Education

Is this grade level where the child should be (do not include a child who voluntarily begins kindergarten at age 6)? ☐ Yes ☐ No

Start Date:

End Date:

Completion Status:

Contact Person:

Phone Number:  Ext:

[Continue](#) [Close](#)

- The information entered on the Maintain Education History page will populate into the School History group box. On the right side of the School History group box are Delete, Edit, and Copy hyperlinks, as well as an Insert button.
  - Click on the Delete hyperlink to delete the corresponding row.
  - Click on the Edit hyperlink to open the Maintain Education History page and make updates to the education record.
  - Click on the Copy hyperlink to quickly create a copy of the current record. As an example, this

feature could be used to document if the child has moved on to the next grade level, but is still enrolled in the same school.

- Click on the Insert button to document a new school.

10. In the Education Passport group box, click on the Insert button to create a new Education Passport. An Education Passport can also be created via Create Case Work > Education. If one is pending, you will need to complete the pending one prior to creating a new one.

Education Passport			
Type	Date Completed	School	Updated By
Exiting Care			Caitlin C. Cake
			<a href="#">Edit</a>
			<a href="#">Insert</a>

11. The Education Passport page prefills with the child's demographic information, school information, agency contact info, and parent/guardian information. The page will prefill with the Student in Care radio button selected. If applicable, select the Student Exiting Care radio button. This will remove the Out of Home Care Provider group box and display an Exiting Information group box at the bottom of the page.

**Note:** When the Education Passport is accessed from the outliner, the student's name will be a hyperlink taking you to Person Management. A [Modify](#) link will also appear in the the Education Information group box taking you to Person Management. To access Person Management when creating an Education Passport via Person Management, simply save and close the page.



Education Passport
TM
Print
Help

### Basic

Student Name:	Andrews, Annie M. (9222721)	Gender: Female	Birthdate: 10/09/2005	Age: 14
<input type="checkbox"/> Display Preferred Name:		Cell Phone:	Email: aandrews@gmail.com	
<input type="checkbox"/> Completed	Date Form Completed:	<input checked="" type="radio"/> Student in Care	<input type="radio"/> Student Exiting Care	

### Education Information

Current School:	Current Grade:
Current School District:	Student has an individualized education plan (IEP): No
Specialized Program(s):	
Is this a school transfer? If yes, from what school?: <input checked="" type="radio"/> Yes <input type="radio"/> No	
Name of School:	Milwaukee German Immersion
School Address:	3778 N 82nd St - Milwaukee, WI 53222-2999
School District:	Milwaukee Sch Dist

### Child Welfare Agency School Contact

Agency Name:	Milwaukee-Admin	Address:	1555 N. River Center Drive Suite 220, Milwaukee, WI 53212		
Caseworker:	Dan, Daisy <a href="#">Search</a>	Email:	Daisy.Dan@wisconsin.gov	Work:	(414)789-7897
Supervisor:	Cake, Caitlin C. <a href="#">Search</a>	Email:	chris.santoslang@wisconsin.gov	Work:	(123)456-7890
		Cell:		Cell:	

### Out of Home Care Provider

[Search](#)

Provider/Parent 1:	Provider, Female	Parent 2:	Provider, Male
Street Address:	123 Main Street	Cell Phone:	
WI City:		Email:	
City:	Milwaukee		
Options:		<a href="#">Go</a>	

Save
Close

12. The Basic group box prefills with the child's demographic information. Checking the Display Preferred Name checkbox prefills the child's Nickname if one is documented on the Additional tab of Person Manangement. Cell Phone and Email are user-enterted fields and will copy over to subsequent Education Passports. Selecting the Completed checkbox and saving the page will run the required edit checks. If all edit checks are passed, the page will freeze and the current date will prefill in the Date Form Completed field.

**Note:** Launch, export and save the template prior to checking the completed checkbox. In some instances the provider's address does not display on the template after the checkbox is completed. The address will always appear on the on-line page.

13. The Education Information group box prefills the Primary school information documented in the School History group box on the Education tab of the child's Person Management page. Select the 'Yes' radio button if the child is transferring from a different school. A list of schools will

appear in a drop down once you begin typing the school's name in the Name of School field. The School Address will then prefill.

14. The Agency Name and Address, primary Caseworker, and the primary Caseworker's Supervisor prefill to the Child Welfare Agency School Contact group box. Select the Search hyperlink to search out a different worker. To make updates to the email address, cell and work phone, a supervisor can go to the Maintain Worker Information page accessed via Maintain > Worker.
15. If a child is currently in an approved out of home care placement, the Provider name, address, and contact information will prefill. Select the Search hyperlink to search out a different provider, or enter the information manually. If the provider is a Private Provider, the Parent 2 section will be blank, and the Primary Facility Contact, Phone, and Email will prefill from the Primary Contact field on the Private Provider page. If the provider is a Home Provider, the Phone field will prefill from the Provider's address record, and the Email and Cell will prefill from the Additional Contact Information group box on the Home Provider page. The Primary Facility Contact should be left blank in a Home Provider scenario.

**Out of Home Care Provider**

[Search](#)

Provider/Parent 1:

Provider, Female

Parent 2:

Provider, Male

Street Address:

123 Main Street

Cell Phone:

WI City:

Amery, 54001

Email:

City:

Amery

State:

WI

ZIP:

54001

Primary Facility Contact:

Phone:

(608)266-5642

Cell Phone:

Email:

16. In the Parent(s)/Guardians(s)/Custodians(s) group box, Parent 1 and Parent 2 will prefill if they're linked to the Parent Info tab on the child's Person Management page. Select the parent's hyperlink and go to the Address tab to update their address, phone, email, or cell phone. Guardians, Indian Custodians, and Legal Custodians will also appear in the group box if linked on the Parent Info tab. Select Yes or No to the question regarding any limitations on interactions with parents, guardians, or other individuals. If Yes, enter an explanation in the narrative box.

Parent(s)/Guardian(s)/Custodian(s)

Parent 1:

[American, Annie M.](#)
123 Main Street, Madison, WI 53701

Phone:

(608)123-1234

Cell:

(608)789-7897

Email:

annieamerican@gmail.com

Parent 2:

[American, Jack](#)

Phone:

Cell:

Email:

Are there any limitations on interaction with a parent, guardian, or other individual that would apply in a school setting?

☒ Yes
☐ No

If yes, please explain (i.e. court orders such as no-contact orders, orders for supervised family interactions).

17. The last group box is a series of narrative questions to help promote school success. After entering the information, select Education Passport under Options and select Go. This will launch the Education Passport template.

Information for School Staff to Promote School Success

Transportation (How will the student get to and from school and school related extracurricular activities?)

Positive attributes and interests

Extracurricular activities (school, community, or spiritual based)

School relevant behavioral triggers (i.e. reacts negatively to sudden noises)

Other relevant information (Not mental health related; i.e. education program details like the name of an after school program student is involved in)

Options:

Go

Save

Close

Close

### Education Passport

**Use of Form:** Whenever a student enters care, changes placement, or exits care, child welfare workers are advised to share the Education Passport form to school staff for the purpose of sharing information to support the educational success of the Student. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

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**Basic Information**

Date Form Completed:		Date of Exit:
<input checked="" type="checkbox"/> Student in Care <input type="checkbox"/> Student Exiting Care		
Name - Student Andrews, Annie M.	Birthdate - Student 10/09/2005	Student ID
	Age 14	Cell Number
	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Email Address aandrews@gmail.com

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**Education Information**

Current School	Current School District	Current Grade
Point of Contact: <a href="https://dpi.wi.gov/foster-care/foster-care-point-of-contact">https://dpi.wi.gov/foster-care/foster-care-point-of-contact</a>		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Specialized Program(s)		If yes, what program(s)?
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Is this a School Transfer?		If yes, from what school and district?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Individualized Education Plan (IEP)		Milwaukee German Immersion - 3778 N 82nd St - Milwaukee, WI 53222-2999 - Milwaukee Sch Dist

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**Child Welfare Agency**

Agency Name Milwaukee-Admin	Agency Address 1555 N. River Center Drive Suite 220, Milwaukee, WI 53212	
Name - Caseworker Dan, Daisy	Office Number (414)789-7897	Email Address Daisy.Dan@wisconsin.gov
	Cell Number	
Name - Supervisor Cake, Caitlin C.	Office Number (123)456-7890	Email Address chris.santoslang@wisconsin.gov
	Cell Number	

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**Out of Home Care Provider**

18. Closing the Education Passport page will return you to the Education tab. Select Edit to re-access the Education Passport.
  
19. If a student is leaving out of home care, select the Student Exiting Care radio button. This will remove the Out of Home Care Provider group box and display an Exiting Information group box at the bottom of the page.

**Education Passport** TM Print Help

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**Basic**

Student Name: Andrews, Annie M. (9222721)      Gender: Female      Birthdate: 10/09/2005      Age: 14

☐ Display Preferred Name:      Cell:      Email: aandrews@gmail.com

☐ Completed      Date Form Completed:      ☒ Student in Care      ☐ Student Exiting Care

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**Education Information**

Current School:      Current Grade:

Current School District:      Student has an individualized education plan (IEP): No

Specialized Program(s):

Is this a school transfer? If yes, from what school?: ☒ Yes ☐ No

Name of School: Milwaukee German Immersion

School Address: 3778 N 82nd St - Milwaukee, WI 53222-2999

School District:      Options: Education Passport

20. Select a value in the 'Student resides with:' dropdown to indicate who the student will be living with. The values available are those that display in the Parent(s)/Guardians(s)/Custodians(s) group box. In the below screen shot both parents are selected. There is also an option to choose just Parent 1, just Parent 2, or Other. Select Edit next to the Name field to go to the Person Management page. If a name is not displaying, go to the Parent Info tab on the child's Person Management page and search out the appropriate person.

**Note:** If the child has been TPR'd, Parent 1 and 2 will not be available for selection. Instead, possible selections will be guardians, custodians, and any documented out of home care provider.

Exit Information

Student resides with:

American, Annie M. and American, Jack

Date exited out of home care:

00/00/0000

Name:

American, Annie M.

Edit

Street Address:

123 Main Street

WI City:

City:

Madison

State:

WI

ZIP:

53701

Phone:

(608)123-1234

Cell:

(608)789-7897

Email:

annieamerican@gmail.com

Name:

American, Jack

Edit

Street Address:

WI City:

City:

State:

ZIP:

Phone:

Cell:

Email:

Notes about student's living arrangement (i.e. 50/50 custody with mother and father)

Options:

Go

Save

Close

21. The Education Passport displays on the outline under the Education icon.

eWiSACWIS

Actions

Financial

State

Security

Help

Refresh

Search

Caitlin C. Cake (Milwaukee County) | Log Out

Home

Cases (495)

Providers (216)

Workers (69)

Approvals (1267)

Access Reports (120)

ICPC Referrals (12)

YJ Referrals (2)

Home Inquiries (31)

Quick Links

Case

Participant

☒ Date restricted
 ☐ Not approved/cancelled

☒ Multiselect

American, Annie M. (9221587)

Case details:

CPS Family - Ongoing

Barron - Barron

Open OHP exists for associated participant (s)

Case address:

123 Main

Abbotsford, WI 54405

Primary worker:

Dan, Daisy

(414) 789-7897

[Daisy.Dan@wisconsin.gov](mailto:Daisy.Dan@wisconsin.gov)

Actions:

Please select an action

View case information

Access Reports

Administration

Adoption

Agreements and Notices

Assessments

Assets and Income

Assignments

Case/Permanency Plan

Education

Eligibility

ICPC

ICWA

Permanency Consultation

Placements

Planning

Related People

Safety

Safety Services

Services

Education

Education Passport

Andrews, Annie M.

Exiting Care